UTAH STATE OFFICE OF REHABILITATION

and the

DIVISION OF SERVICES FOR THE DEAF AND HARD OF HEARING

Annual Interpreter Recognition Form - Nationally Certified Interpreters

PLEASE PRINT	,	PLEASE CIRCLE
Name	M ale Female	Type of Certificate
I valle	Male Female	CI
Address	NEW? Y N	Certificate of Interpreting CT
City, State, Zip		Certificate of Transliterating
City, State, 21p		CLIP Conditional Legal Interpreting
Home Phone Work/cell Ph	one	Permit
Pinth data / / E mail adduses		CLIP-R Conditional Legal Interpreting
Birthdate // / E-mail address		Permit - Relay
•		CDI-P Certified Deaf Interpreter -
Are you currently certified in another state? NOY	/ES State	Provisional
• <u> </u>	CDI Certified Deaf Interpreter	
New Information! PLEASE READ CAR	EELILI V	CSC
New Into	El GEET.	Comprehensive Skills Certificate
	RSC	
While not required to hold Utah certification, interprete	•	Reverse Skills Certificate
cates must be recognized by the State of Utah before bei	ng able to interpret in this state.	NAD
T I		Score
This approval must be obtained annually, by completing the \$30.00 recognition fee. Please attach a copy of yo		Cued Language
the \$50.00 recognition fee. Flease attach a copy of yo	ur current national certificate.	Level
The Division of Services for the Deaf and Hard of Hea	ring (DSDHH) and the Utah	
Interpreter Program maintains a state information system DSDHH publishes and provides such information to nation public and private employers who seek certified interpret your telephone number and e-mail address in the Utah Certific information sharing on certified interpreters and transliterators.	onal, state and local governmenta ters/transliterators. Your permissio ied Interpreter List, and to share san	bodies and other n is required to publish
YES, you may publish my name and contact informa	ation in the Utah Certified Interpre	ter List / UIP website.
NO. Do not publish my contact information. I ur	nderstand only my name and level	will be published.
Interpreter Signature	Date	
For Division Use Only	Return form and p	payment to
Approved	Utah Interprete	-
	5709 South 15	
Director, Utah Interpreter Program	Taylorsville UT 84123-5217	

January 2004 Reviewed by _____ Date received _____Paid ____